PTO/SB/05 (1600)

IDS (2)

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UTILITY PATENT APPLICATION **TRANSMITTAL**

|600-1-158N DIV Attorney Docket No. Robert H. Masure First Inventor

CHOLINE BINDING PROTEINS FOR

				г.	L68449	0804	ITIC
(Only for new nonprovision	nal applications under 37 CFR 1.53(b),) E	xpress	Mail Label No. □	L00449	0094	103
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231					
	orm (e.g., PTO/SB/17)		7.	CD-ROM or CD-R i	n duplicate	e, large	e table or
1. (Submit an original and a Applicant claims s	duplicate for fee processing) mall entity status.		O Nivo	Computer Program deotide and/or Amino A			ubmission
2. See 37 CFR 1.27.	· · ·			applicable, all necessar		::ICE 3	abmission
3. X Specification [Total Pages 124]		а. [Computer Readal	ole Form (CRF)		
- Descriptive title	of the invention e to Related Applications		b. §	Specification Sequence	Listing or	ր:	
- Statement Rega	arding Fed sponsored R & D			i. CD-ROM	or CD-R (2	copie	s); or
	equence listing, a table, program listing appendix		_	i i. 🗵 paper			
- Background of	the Invention		, c.	X Statements verify	ing identity	y of ab	ove copies
- Brief Summary - Brief Descriptio	of the Invention on of the Drawings (if filed)	. /	/	CCOMPANYING	APPLIC	ATIC	ON PARTS
 Detailed Descri Claim(s) 	ption	V	9.	X Assignment Paper		heet &	
- Abstract of the	Disclosure		10.	37 CFR 3.73(b) S (when there is an			Power of Attorney
4. X Drawing(s) (35 U]	11.	English Translation		ent <i>(if a</i>	
5. Oath or Declaration and Formal [Total Pages 6]			12.	12. X Information Disclosure Copies of IDS Statement (IDS)/PTO-1449			
a. Newly executed (original or copy)			13.	X Preliminary Amer			
b. Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed)			14.	(Should be specifically iterritzed)			
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s)			15.	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)			
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR			16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35				
1.63(d)(2) and 1 33(b).			-	or its equivalent			
6. Application Data Sheet. See 37 CFR 1.76			17.	17. X Other: Reduest for Transfer of Compute Readable Form: Supplementat			
18. If a CONTINUING APPLI or in an Application Data She	CATION, check appropriate box, and	supply	the requ	iisite information below	and in a	orelimi	nary amendment,
Continuation X	Divisional Continuation-in-part (0	CIP)	(of prior application No	847	7.065	<u> </u>
Prior application information:	Examiner M. Mosher			Group Art Unit 1648			
	ONAL APPS only: The entire disclosure f the disclosure of the accompanying co						
,	relied upon when a portion has been ina			• • •	-	•	rated by reference.
	19. CORRESPO	NDEN	ICE ADD	RESS			
Customer Number or Bar C	ode Label 23565 (Insert Customer No. or Atta	ch bar s	ode label he	or	Correspon	dence a	ddress below
Name	Klauber & Jackson						
	411 Hackensack Avenue						
Address							<u> </u>
City	Hackensack S		State	te New Jersey Zip Code 0		07601	
Country	United States	Telep	hone	201-487-5800	Fá	ax .	201-343-1684
Name (Print/Type)	Michael D. Davis Registration No. (Attorney/Agent) 39,161			.61			
Signature	Mechael D. Dava Date April 9, 2001			il 9, 2001			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

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Complete if Known			
Application Number	unassigned		
Filing Date	herewith		
First Named Inventor	Robert H. Masure		
Examiner Name	unknown		
Group Art Unit	unknown		
Attorney Docket No.	600.1-158N DIV		

METHOD OF PAYMENT	FEE CALCULATION (continued)				
1. X The Commissioner is hereby authorized to charge indicated fees and credit any overnayments to:	3. ADDITIONAL FEES				
indicated fees and credit any overpayments to:	Large Small				
Account Number 11-1153	Entity Entity Fee	Fee Paid			
Deposit	Code (\$) Code (\$)				
Account Name	105 130 205 65 Surcharge - late filing fee or oath				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status.	139 130 139 130 Non-English specification				
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. X Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examıner action				
X Check Credit card Order Other	113 1,840* 113 1,840* Requesting publication of SIR after				
FEE CALCULATION	Examiner action				
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month				
Large Entity Small Entity	116 390 216 195 Extension for reply within second month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 890 217 445 Extension for reply within third month				
0000 (0)	118 1,390 218 695 Extension for reply within fourth month				
101 710 201 355 Utility filing fee 710.00	128 1,890 228 945 Extension for reply within fifth month				
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal				
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal				
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing				
	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 710.00	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES Fee from	141 1,240 241 620 Petition to revive - unintentional				
Extra Claims <u>below</u> Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)				
Total Claims 47 -20** = 27 × 18.00 = 486.00	143 440 243 220 Design issue fee				
Independent Claims $3^{**} = 8 \times 80.00 = 640.00$	144 600 244 300 Plant issue fee				
Multiple Dependent	122 130 122 130 Petitions to the Commissioner				
	123 50 123 50 Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)				
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection				
104 270 204 135 Multiple dependent claim, if not paid	(37 ČFR § 1 129(a))				
109 80 209 40 ** Reissue independent claims over original patent	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$) 1,126.00	Other fee (specify)				
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				

SUBMITTED BY				Complete (if applicable)		
Name (PnntiType)	Michael D. Davis	Registration No. (Attorney/Agent) 39,161	Telephone	201-487-5800		
Signature	Mechal D. Devis		Date	April 9, 2001		

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:

ROBERT H. MASURE ET AL.

SERIAL NO.:

UNASSIGNED

EXAMINER:

UNKNOWN

FILED

HEREWITH

ART UNIT

UNKNOWN

FOR

CHOLINE BINDING PROTEINS FOR ANTI-PNEUMOCOCCAL

VACCINES

REQUEST FOR TRANSFER OF COMPUTER READABLE FORM

ASSISTANT COMMISSIONER FOR PATENTS WASHINGTON, D.C. 20231

Sir:

Applicants request that the previously submitted sequence information filed in computer readable form in Application Number 08/847,065 be used in the present Application. This sequence information was on the second computer readable form filed in that Application.

Respectfully submitted,

MICHAEL D. DAVIS Attorney for Applicant(s) Registration No. 39,161

KLAUBER & JACKSON 411 Hackensack Avenue Hackensack, NJ 07601 (201) 487-5800

Date: April 9, 2001